



National Association of County & City Health Officials

*The National Connection for Local Public Health*

April 2, 2015

Karen DeSalvo, MD, MPH  
National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Suite 729-D  
Washington, DC 20201

RE: Public Comment on Connecting Health and Care for the Nation: A Shared Nationwide Interoperability Roadmap Draft Version 1.0

Dear Dr. DeSalvo:

On behalf of the National Association of County and City Health Officials (NACCHO), I am pleased to submit comments on *Connecting Health and Care for the Nation: A Shared Nationwide Interoperability Roadmap Draft Version 1.0* (known in this document as “the Interoperability Roadmap”). NACCHO is the voice of the 2,800 local health departments and 184,000 health department staff who work every day to help people to be healthy and safe. NACCHO is committed to promoting the advancement of health information technology (H.I.T.) to improve health outcomes.

NACCHO would like to show its support of the Joint Public Health Informatics Taskforce (JPHIT) leadership on this topic. JPHIT has recently submitted public comments on the interoperability road map that reflect the broad perspectives of nine national public health associations. As a founding member and co-chair of JPHIT, we applaud JPHIT for its leadership on an issue so vital to our nation and concur with its recommendations.

NACCHO supports the Interoperability Roadmap’s overall goal, objectives, and approach. Public and private efforts to build an information ecosystem must advance toward the learning health system (LHS) to maximize public health benefits. That data flow among healthcare and health-related service settings to generate population-level insights is fundamental for a LHS. NACCHO applauds actions that prioritize the development of interoperability building blocks for public health purposes.

NACCHO finds significant gaps in the Interoperability Roadmap’s discussion of health information system interoperability for population and public health, both strategically and tactically. Strategically, NACCHO believes that clinical and public health information interoperability must be simultaneously advanced. When actions are prioritized to first benefit patients and then benefit communities, the overall benefit to the public is unnecessarily diminished or delayed. We recommend that the ONC adopt a strategy that prioritizes actions that have mutual benefit to the quality of clinical and public health services. At a tactical level, adoption of this recommendation would, at a minimum, entail the following:



1. Stakeholders: Recognize and address the interoperability needs of local public health agencies, and other governmental and non-governmental public health service providers, both as data providers as well as data consumers.
2. Governance: In any governance body, industry-led or otherwise, ensure balanced representation and input for the public's interest in setting policy and standards for interoperability. To ensure such representation, local health officials must be a member of any governing body. Because of the diversity of local health departments, the governance group must acknowledge the differences between larger, mid-sized, and small health departments. NACCHO also supports the inclusion of state and federal public health officials, to further emphasize that public health needs and challenges are varied.
3. Priority use cases: A public health use case, mutually beneficial to patients and their communities, should be the first and top Interoperability Roadmap priority. Doing so will promote near-term returns on federal Health IT investments that are population-wide; solutions in core legal barriers that constrain interstate public health data exchange; and information technologies with baseline functionalities for the public good. NACCHO recommends use case #2, "Clinical settings and public health are connected through bi-directional interfaces that enable seamless reporting to public health departments and seamless feedback and decision support from public health to clinical providers."
4. Core technical standards and functions: The common "clinical" and patient-matching datasets must be further standardized and grown for public health purposes. NACCHO supports the inclusion of geographic information, down to the zip code level in order for local health departments to direct targeted interventions within their communities. ONC should also include a data field for pregnancy, as many local public health programs are geared towards women and maternal health.

NACCHO appreciates the opportunity to provide comments on the proposed Interoperability Roadmap. Local health departments must be included in any federal plan to expand the use of interoperable health I.T. systems. The development of local public health I.T. systems will be an essential component of the Interoperability Roadmap's vision for a learning health system, and a healthier population. NACCHO looks forward to continuing to support ONC's efforts as a partner in this effort.

Sincerely,



LaMar Hasbrouck, MD, MPH  
Executive Director